Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NORTH CAROLINA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name Paul Middle name Nichols Last name and Suffix (Sr., Jr., II, III)	Teresa First name D. Middle name Nichols Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7714	xxx-xx-1453

Debtor 1 Gregory Paul Nichols
Debtor 2 Teresa D. Nichols

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	533 Omaha Drive	If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Harnett				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	otor 1 otor 2	Gregory Paul Nich Teresa D. Nichols	ols				Case number (if known)	
Par	rt 2:	Tell the Court About	Your Bar	kruptcy Ca	ase			
7. The chapter of the Bankruptcy Code you are choosing to file under						ach, see <i>Notice Required by</i> ge 1 and check the appropria	11 U.S.C. § 342(b) for Individuals Filing for Barte box.	nkruptcy
	cnoc	ising to file under	☐ Cha	pter 7				
			☐ Cha	pter 11				
			☐ Cha	pter 12				
			■ Cha	pter 13				
8.	How	you will pay the fee	a o	bout how yo	ou may pay. Typicall attorney is submittii	y, if you are paying the fee y	ck with the clerk's office in your local court for m ourself, you may pay with cash, cashier's check nalf, your attorney may pay with a credit card or	k, or money
					y the fee in installnee in Installments (O		ion, sign and attach the Application for Individua	ils to Pay
			□ I b	request that ut is not req pplies to yo	at my fee be waived juired to, waive your ur family size and yo	d (You may request this option fee, and may do so only if you are unable to pay the fee	on only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove in installments). If you choose this option, you m	erty line that
			th	ne <i>Applicati</i> o	on to Have the Chap	ter 7 Filing Fee Waived (Off	icial Form 103B) and file it with your petition.	
9.	bank	you filed for ruptcy within the	■ No.					
	last	3 years?	☐ Yes.					
				District		When	Case number	
				District District		When When	Case number Case number	
				DISTRICT		when	Case number	
10.		any bankruptcy s pending or being	■ No					
	filed not f you,	by a spouse who is iling this case with or by a business ner, or by an	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your	■ No.	Go to	line 12.			
	resid	lence?	☐ Yes.	Has yo	our landlord obtained	d an eviction judgment again	st you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial</i> this bankruptcy per		Judgment Against You (Form 101A) and file it a	as part of

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	otor 1 Gregory Paul Nichotor 2 Teresa D. Nichols		Case number (if known)	
Par	Report About Any Bu	ısinesses	You Own as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one		Number, Street, City, State & ZIP Code	
	sole proprietorship, use a separate sheet and attach it to this petition.		Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))	
			☐ None of the above	
13.	Chapter 11 of the deadli Bankruptcy Code and are operation on the composition of the comp		e filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate s. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of its, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure s.C. 1116(1)(B).	f
	debtor? For a definition of small	■ No.	I am not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.	
		☐ Yes.	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code) .
Par	t 4: Report if You Own or	Have An	/ Hazardous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	- •		Number, Street, City, State & Zip Code	

Debtor 1 Gregory Paul Nichols
Debtor 2 Teresa D. Nichols

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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	tor 1 Gregory Paul Nichtor 2 Teresa D. Nichols				Case no	umber (if known)		
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busine money for a business or investme			•		
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	hat are not consum	ner debts or bu	siness debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. Go	to to line 18.				
Do you estimate that after any exempt property is excluded a		☐ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab				ed and administrative expenses	
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000			01-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000			01-100,000	
		□ 100-1 □ 200-9		10,001-25,00	00	⊔ More	than100,000	
19.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 -	\$10 million	□ \$500	,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001 - \$100,000 ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million			00,000,001 - \$10 billion	
	30 HO LLIN						000,000,001 - \$50 billion than \$50 billion	
20.	How much do you	□ \$0 - \$	550,000	□ \$1,000,001 -	\$10 million	□ \$500	,000,001 - \$1 billion	
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million			00,000,001 - \$10 billion	
		■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million			☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion	
Par	:7: Sign Below							
For	you	I have ex	camined this petition, and I declare	under penalty of pe	erjury that the i	information provide	d is true and correct.	
			chosen to file under Chapter 7, I an tates Code. I understand the relief					
			rney represents me and I did not pa nt, I have obtained and read the not				o help me fill out this	
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 and 3571.						
			gory Paul Nichols y Paul Nichols		/s/ Teresa D Teresa D. N			
			e of Debtor 1		Signature of D			
		Executed	d on July 26, 2019		Executed on	July 26, 2019		
			MM / DD / YYYY			MM / DD / YYYY		

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Debtor 1 Debtor 2	Gregory Paul Nic Teresa D. Nichols				Case	number (if known)
represent	attorney, if you are ted by one not represented by	under Chap for which the	oter 7, 11, 12, or 13 of title 11, to e person is eligible. I also cert	United States Code, and hittify that I have delivered to	ave ex the de	informed the debtor(s) about eligibility to proceed plained the relief available under each chapter abtor(s) the notice required by 11 U.S.C. § 342(b) added after an inquiry that the information in the
an attorne	ey, you do not need	schedules fi	iled with the petition is incorrec	ct.		
	- pg	/s/ Danny	Bradford	Dat	Э	July 26, 2019
			f Attorney for Debtor			MM / DD / YYYY
		Danny Bra	adford 23011			
		Printed name				
		Paul D. Br	radford, PLLC			
		Firm name				
		455 Swifts	side Drive			
		Suite 106				
			27518-7198			
		Number, Street	, City, State & ZIP Code			
		Contact phone	(919)758-8879	Email addro	ess	dbradford@bradford-law.com
		23011 NC				
		Bar number & S	State			_

Fill	in this inform	nation to identify your case:		
	otor 1	**		
Dec	ntor r	Gregory Paul Nichols First Name Middle Name Last Name		
	otor 2 use if, filing)	Teresa D. Nichols First Name Middle Name Last Name		
` '				
Unit	ed States Bai	nkruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA		
Cas	e number		_	Check if this is an
(····,		ш	amended filing
Off	ficial Fo	rm 106Sum		
		f Your Assets and Liabilities and Certain Statistical Information		12/15
infor	rmation. Fill o	and accurate as possible. If two married people are filing together, both are equally responsible for the fout all of your schedules first; then complete the information on this form. If you are filing amendens, you must fill out a new <i>Summary</i> and check the box at the top of this page. Arrize Your Assets		
	<u> </u>		V	Your assets
				Value of what you own
1.	Schedule A	/B: Property (Official Form 106A/B)		460,000,00
	1a. Copy line	e 55, Total real estate, from Schedule A/B		\$ 160,000.00
	1b. Copy line	e 62, Total personal property, from Schedule A/B	;	\$ 54,480.00
	1c. Copy line	e 63, Total of all property on Schedule A/B	:	\$ 214,480.00
Part	t 2: Summa	arize Your Liabilities		
			Y	Your liabilities
			Δ	Amount you owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) a total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D		\$ 186,172.00
3.		F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
J.		e total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	;	\$ 213.00
	3b. Copy th	e total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	;	\$ 5,243.00
		Your total liabilities	$ ^{\$}$	191,628.00
Part	t 3: Summa	arize Your Income and Expenses		
4.	Schedule I:	Your Income (Official Form 106I)		
٦.		ombined monthly income from line 12 of Schedule I	;	\$ 5,801.40
5.		Your Expenses (Official Form 106J) nonthly expenses from line 22c of Schedule J	:	\$4,491.28
Part	4: Answe	r These Questions for Administrative and Statistical Records		
6.	-	ng for bankruptcy under Chapters 7, 11, or 13? u have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur oth	her schedules.
7.	■ Yes What kind o	of debt do you have?		
		ebts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for old purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a pei	rsonal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

the court with your other schedules.

Debtor 1	Gregory Paul Nichols
Debtor 2	Taresa D. Nichols

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

8,846.30

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A or Oak adula E/E consulta fallondar	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	213.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	4,713.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,926.00

	J		I Thea official Efficied office	710 00.1	0.10 1	ago 10 01 00
Fill	in this informa	ation to identify your case and t	his filing:			
Deb	otor 1	Gregory Paul Nichols				
		First Name Midd	le Name Last Name			
	otor 2 use, if filing)	Teresa D. Nichols First Name Midd	le Name Last Name			
Uni	ed States Bank	cruptcy Court for the: EASTERN	I DISTRICT OF NORTH CAROLINA			
Cas	e number					☐ Check if this is an amended filing
Of	ficial Form	m 106A/B				
Sc	hedule	A/B: Property				12/15
	ver every questic	on.	sheet to this form. On the top of any additional pages other Real Estate You Own or Have an Interest In	, write your na	ame and case	e number (if known).
	No. Go to Part 2		any residence, building, land, or similar property?			
1.1	533 Omaha Street address, if a	Drive available, or other description	What is the property? Check all that apply ■ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative	the amount	of any secured	ims or exemptions. Put d claims on <i>Schedule D:</i> ns <i>Secured by Property</i> .
	Broadway	NC 27505-0000	Manufactured or mobile home Land	Current val		Current value of the portion you own?
	City	State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check one	Describe th (such as fe a life estate	e nature of ye simple, tena), if known.	our ownership interest ancy by the entireties, or
	Harnett		Debtor 1 only	Tenancy	by Entiret	ies
	County		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this itemproperty identification number:	(see inst	ructions)	munity property
			or all of your entries from Part 1, including any t number here		=>	\$160,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debto Debto		Bregory Paul Teresa D. Nich			Case number (if known)	
. Caı	s, vans	, trucks, tracto	rs, sport utility vel	hicles, motorcycles		
	No					
= \	⁄es					
3.1	Make:	Ram		Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	1500		☐ Debtor 1 only		red claims on Schedule D: laims Secured by Property.
	Year:	2015		Debtor 2 only		
	Approxi	mate mileage:	80000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other in	formation:		☐ At least one of the debtors and another		
				☐ Check if this is community property (see instructions)	\$20,450.00	\$20,450.00
3.2	Make:	Dodge		Who has an interest in the property? Check one	Do not deduct secured	claims or exemptions. Put
5.2	Model:	Journey		Debtor 1 only		red claims on Schedule D: laims Secured by Property.
	Year:	2018		Debtor 2 only	Orealions who have o	aims Secured by Froperty.
		mate mileage:	25000	☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:		☐ At least one of the debtors and another	cimio proporty:	portion you out
				☐ Check if this is community property (see instructions)	\$15,000.00	\$15,000.00
3.3	Make: Model:	Honda CR-V		Who has an interest in the property? Check one	the amount of any secu	claims or exemptions. Put ared claims on Schedule D: laims Secured by Property.
	Year:	2014		■ Debtor 1 only □ Debtor 2 only		
		nate mileage:	120000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
		formation:		☐ At least one of the debtors and another		, ,
				☐ Check if this is community property (see instructions)	\$11,525.00	\$11,525.00
	<i>mples:</i> E			d other recreational vehicles, other vehicles tercraft, fishing vessels, snowmobiles, motorcyc		
				n for all of your entries from Part 2, includin		\$46,975.00
Part 3	Descri	be Your Persona	al and Household Ite	ems		
Do yo	ou own	or have any leg	gal or equitable int	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or examplings
Ex	amples: No	goods and fur Major appliance		china, kitchenware		claims or exemptions.
				ds, including furniture, appliances, coo		
		I	tableware, utens tools.	sils, misc. personal items and misc. ha	nd and yard	\$2,000.0

Debtor 1 Debtor 2	Gregory Pa Teresa D. N		
		Bed and 3 Televisions financed by Conn's.	\$700.00
		Living room suite financed by Conns.	\$800.00
□ No	les: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music colle Il phones, cameras, media players, games	ections; electronic devices
		Electronics, including televisions, computer and accessories and cellular telephones.	\$1,500.00
Example No		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or ions, memorabilia, collectibles	baseball card collections;
Example □ No	nent for sports a les: Sports, phot musical inst	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools;
		Misc. sports and hobby equipment.	\$150.00
□ No		es, shotguns, ammunition, and related equipment	
		S&W M&P 40.	\$200.00
		Ruger New Vaquaro .45 Long Colt single action revolver.	\$400.00
□ No		elothes, furs, leather coats, designer wear, shoes, accessories	
		Men's and women's clothing.	\$400.00
□ No		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold	l, silver
		Jewelry.	\$300.00
-	arm animals ples: Dogs, cats,	, birds, horses	

No

☐ Yes. Describe.....

	ebtor 1 ebtor 2	Gregory Pau Teresa D. Ni		ls			Case number (if known)	
	■ No	•		•	did not already	list, including any he	alth aids you did not list	
	☐ Yes.	Give specific info	ormation					
15						ling any entries for pa	ges you have attached	\$6,450.00
		scribe Your Finan						
Do	you ow	vn or have any le	egal or e	quitable interes	t in any of the f	following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			our wallet, in you			nand when you file your petition	on
							Cash	\$200.00
	Examp □ No				ınts with the sar	cates of deposit; shares me institution, list each. ution name:	in credit unions, brokerage h	ouses, and other similar
			17.1.	Checking	Fort	Sill National Bank	Acct. ****3972.	\$500.00
			17.2.	Checking	Banl	k of America acct. *	****	\$25.00
			17.3.	Savings	Banl	k of America Acct *	***	\$7.00
				cly traded stocks ent accounts with		s, money market accou	ints	
	☐ Yes			Institution or issu	uer name:			
	Non-pu joint vo ■ No		ock and	interests in inco	orporated and u	unincorporated busin	esses, including an interes	t in an LLC, partnership, and
	☐ Yes.	Give specific info		about them me of entity:			% of ownership:	
	Negotia Non-ne ■ No	iable instruments egotiable instrum	include p ents are	personal checks, those you cannot	cashiers' check	non-negotiable instrui s, promissory notes, ar neone by signing or deli	nd money orders.	
	⊔ Yes.	Give specific info		about them uer name:				
		ment or pension bles: Interests in I			x), 403(b), thrift s	savings accounts, or ot	her pension or profit-sharing	plans
		List each accoun		tely. of account:	Institu	ution name:		

	_	sa D. Nichols		Ca	ase number (if known)	
22.	Your share of a		ave made so that you may cont prepaid rent, public utilities (elec			, or others
	■ No □ Yes		Institution n	ame or individual:		
23.	Annuities (A co	ontract for a periodic payı	ment of money to you, either for	life or for a number of y	rears)	
	■ No □ Yes	Issuer name and c	lescription.			
24.	26 U.S.C. §§ 53	education IRA, in an ac 0(b)(1), 529A(b), and 529	count in a qualified ABLE pro 9(b)(1).	gram, or under a quali	ified state tuition progra	am.
	■ No □ Yes	Institution name ar	nd description. Separately file th	e records of any interes	ts.11 U.S.C. § 521(c):	
25.	Trusts, equitab	ole or future interests in	property (other than anythin	g listed in line 1), and	rights or powers exerci	sable for your benefit
		ecific information about t	hem			
26.	, , ,		e secrets, and other intellectu sites, proceeds from royalties a		S	
	☐ Yes. Give sp	ecific information about t	hem			
	Examples: Buil ■ No		censes, cooperative association	n holdings, liquor license	es, professional licenses	
	·	ecific information about t	hem			
M	oney or property	y owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov ☐ No ☐ Yes. Give spe	-	nem, including whether you alrea	ady filed the returns and	the tax years	
	·			•	•	
			2018 Federal Tax refund		Federal	\$323.00
	■ No		ny, spousal support, child suppo	ort, maintenance, divorce	e settlement, property se	ttlement
	Examples: Unp	s someone owes you paid wages, disability insu- nefits; unpaid loans you manufectific information	urance payments, disability bene nade to someone else	efits, sick pay, vacation	pay, workers' compensa	tion, Social Security
31.	Interests in ins		rance; health savings account (I	HSA); credit, homeowne	er's, or renter's insurance	
	■ No □ Yes. Name th	ne insurance company of Company ı	each policy and list its value. name:	Beneficiary	:	Surrender or refund value:

Debtor 1 Debtor 2	Gregory Paul Nichols Teresa D. Nichols Case number (if known)	
If you	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to recone has died.	eive property because
☐ Yes.	Give specific information	
	s against third parties, whether or not you have filed a lawsuit or made a demand for payment ples: Accidents, employment disputes, insurance claims, or rights to sue	
☐ Yes.	Describe each claim	
34. Other ■ No	contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to	set off claims
☐ Yes.	Describe each claim	
■ No	nancial assets you did not already list Give specific information	
	the dollar value of all of your entries from Part 4, including any entries for pages you have attached art 4. Write that number here	\$1,055.00
Part 5: De	scribe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
37. Do you	own or have any legal or equitable interest in any business-related property?	
No. G	o to Part 6.	
☐ Yes. (Go to line 38.	
	scribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. You own or have an interest in farmland, list it in Part 1.	
46. Do yo ı	own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
■ No.	Go to Part 7.	
☐ Yes	s. Go to line 47.	
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do yo u <i>Exam</i> ■ No	u have other property of any kind you did not already list? bles: Season tickets, country club membership	
	Give specific information	
54. Add	the dollar value of all of your entries from Part 7. Write that number here	\$0.00

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Deb Deb	tor 1 Gregory Paul Nichols tor 2 Teresa D. Nichols			Case number (if known)	
Part	8: List the Totals of Each Part of this Form				_
55.	Part 1: Total real estate, line 2				\$160,000.00
56.	Part 2: Total vehicles, line 5		\$46,975.00		
57.	Part 3: Total personal and household items, line 15		\$6,450.00		
58.	Part 4: Total financial assets, line 36		\$1,055.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$54,480.00	Copy personal property total	\$54,480.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$214,480.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Gregory Paul Nic	hols		
	First Name	Middle Name	Last Name	
Debtor 2	Teresa D. Nichols	5		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NORTH CAROLINA	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
533 Omaha Drive Broadway, NC 27505 Harnett County Line from Schedule A/B: 1.1	\$160,000.00	•	\$30,007.00 100% of fair market value, up to	N.C. Gen. Stat. § 1C-1601(a)(1)
Line Horr Schedule A.D. 1.1		_	any applicable statutory limit	
Household goods, including furniture, appliances, cookware,	\$2,000.00		\$2,000.00	N.C. Gen. Stat. § 1C-1601(a)(4)
tableware, utensils, misc. personal items and misc. hand and yard tools. Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	
Electronics, including televisions, computer and accessories and	\$1,500.00		\$1,500.00	N.C. Gen. Stat. § 1C-1601(a)(4)
cellular telephones. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Misc. sports and hobby equipment.	\$150.00		\$150.00	N.C. Gen. Stat. § 1C-1601(a)(4)
2.10 1.5.11 60/1604/67/25. 01.1			100% of fair market value, up to any applicable statutory limit	
S&W M&P 40. Line from Schedule A/B: 10.1	\$200.00		\$200.00	N.C. Gen. Stat. § 1C-1601(a)(4)
Zano nom Soriodalo 7VB. 1911			100% of fair market value, up to any applicable statutory limit	

	btor 1 btor 2	Gregory Paul Nichols Teresa D. Nichols			Case number (if known)	
		description of the property and line on dule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	sing	er New Vaquaro .45 Long Colt le action revolver. from Schedule A/B: 10.2	\$400.00		\$400.00 100% of fair market value, up to	N.C. Gen. Stat. § 1C-1601(a)(4)
					any applicable statutory limit	
		's and women's clothing. from Schedule A/B: 11.1	\$400.00	•	\$400.00	N.C. Gen. Stat. § 1C-1601(a)(4)
					100% of fair market value, up to any applicable statutory limit	
	Jewe	elry. rom <i>Schedule A/B</i> : 12.1	\$300.00	•	\$300.00	N.C. Gen. Stat. § 1C-1601(a)(4)
					100% of fair market value, up to any applicable statutory limit	
	Casi Line f	n from <i>Schedule A/B</i> : 16.1	\$200.00		\$200.00	N.C. Gen. Stat. § 1-362
					100% of fair market value, up to any applicable statutory limit	
		cking: Fort Sill National Bank	\$500.00		\$500.00	N.C. Gen. Stat. § 1-362
	Line f	from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
		cking: Bank of America acct. *****	\$25.00		\$25.00	N.C. Gen. Stat. § 1-362
					100% of fair market value, up to any applicable statutory limit	
		ngs: Bank of America Acct ****	\$7.00	•	\$7.00	N.C. Gen. Stat. § 1-362
					100% of fair market value, up to any applicable statutory limit	
		eral: 2018 Federal Tax refund.	\$323.00		\$323.00	N.C. Gen. Stat. § 1C-1601(a)(2)
					100% of fair market value, up to any applicable statutory limit	
3.		ou claiming a homestead exemption of ect to adjustment on 4/01/22 and every 3			iled on or after the date of adjustmen	nt.)
		No				
		Yes. Did you acquire the property covere	ed by the exemption w	ithin 1	,215 days before you filed this case?	?
		□ No □ Yes				

Rev. 3/2016

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NORTH CAROLINA

IN THE MATTER OF: Gregory Paul Nichols Teresa D. Nichols Debtor(s). CASE NUMBER:

SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Gregory Paul Nichols and Teresa D. Nichols</u>, claim the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and nonbankruptcy Federal law: (Attach additional sheets if necessary).

1. NCGS 1C-1601(a)(1) (NC Const., Article X, Section 2) REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT (The exemption is not to exceed \$35,000; however, an unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in the property not to exceed \$60,000 in value so long as the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner, if a child use initials only, of the property below).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Mortgage Holder or Lien Holder	Amount of Mortgage or Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(1)
533 Omaha Drive Broadway, NC 27505 Harnett County	160,000.00	J	Home Point Financial Corporation	129,993.00	30,007.00	30,007.00
Debtor's Age: Name of former co-owne	er:					

VALUE OF REAL ESTATE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(1): \$ 30,007.00

2. NCGS 1C-1601(a)(3) MOTOR VEHICLE (The exemption in one vehicle is not to exceed \$3,500).

Model, Year Style of Auto	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	<u>Lien Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(3)
-NONE-		<u> </u>				

VALUE OF MOTOR VEHICLE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(3): \$ 0,00

3. NCGS 1C-1601(a)(4) (NC Const., Article X, Section 1) PERSONAL OR HOUSEHOLD GOODS (The debtor's aggregate interest is not to exceed \$5,000 plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents). The number of dependents for exemption purposes is 1.

Description of Property	Market <u>Value</u>	(02)0000.	Lien <u>Holder</u>	Amount <u>of Lien</u>	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Electronics, including televisions, computer and accessories and cellular telephones.	1,500.00	J			1,500.00	1,500.00
Household goods, including furniture, appliances, cookware, tableware, utensils, misc. personal items and misc. hand and yard tools.	2,000.00	J			2,000.00	2,000.00
Jewelry.	300.00	J			300.00	300.00
Men's and women's clothing.	400.00	J			400.00	400.00

Schedule C-1 - Property Claimed as Exempt - 3/2016

Description of Property	Market <u>Value</u>	(DZ)DCDIOI Z	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Claimed as Exempt Pursuant to NCGS 1C-1601(a)(4)
Misc. sports and hobby equipment.	150.00	J			150.00	150.00
Ruger New Vaquaro .45 Long Colt single action revolver.	400.00	D1			400.00	400.00
S&W M&P 40.	200.00	D1			200.00	200.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(4): \$ 4,950.00

4. NCGS 1C-1601(a)(5) TOOLS OF TRADE (The debtor's aggregate interest is not to exceed \$2,000 in value).

Description	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of <u>Lien</u>	Net <u>Value</u>	
-NONE-						

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(5): \$ 0.00

5. NCGS 1C-1601(a)(6) LIFE INSURANCE (NC Const., Article X, Section 5).

Description\Insured\Last Four Digits of Policy Number\Beneficiary(if child, initials only)		Cash Value
-NONE-		

6. NCGS 1C-1601(a)(7) PROFESSIONALLY PRESCRIBED HEALTH AIDS (For Debtor or Debtor's Dependents, no limit on value).

<u>Description</u>	
-NONE-	

7. NCGS 1C-1601(a)(8) COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES OR ANNUITIES, OR COMPENSATION FOR DEATH OF A PERSON UPON WHOM THE DEBTOR WAS DEPENDENT FOR SUPPORT. COMPENSATION NOT EXEMPT FROM RELATED LEGAL, HEALTH OR FUNERAL EXPENSE.

Description AND Source of Compensation, Including Name (If child, initials only) & Last Four Digits of Account Number of any Disability Policy/Annuity

-NONE-

8. NCGS 1C-1601(a)(2) ANY PROPERTY (Debtor's aggregate interest in any property is not to exceed \$5,000 in value of any unused exemption amount to which the debtor is entitled under NCGS 1C-1601(a)(1)).

Description of Property and Address	Market <u>Value</u>	Owner (D1)Debtor 1 (D2)Debtor 2 (J)Joint	Lien <u>Holder</u>	Amount of Lien	Net <u>Value</u>	Value Claimed as Exempt Pursuant to NCGS 1C-1601(a)(2)
Federal: 2018 Federal Tax refund.	323.00	J			323.00	323.00

VALUE CLAIMED AS EXEMPT PURSUANT TO NCGS 1C-1601(a)(2): \$ 323.00

9. NCGS 1C-1601(a)(9) and 11 U.S.C. § 522 INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in §§ 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in § 408(b) of the Internal Revenue Code, accounts established as part of a trust described in § 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under § 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.

Type of Account\Location of Account\Last Four Digits of Account Number
-NONE-

10. NCGS 1C-1601(a)(10) FUNDS IN A COLLEGE SAVINGS PLAN, as qualified under § 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. §§ 541(b)(5)-(6), (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, the contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses.

College Savings Plan\Last Four Digits of Account Number\Value\Initials of Child Beneficiary

-NONE-

11. NCGS 1C-1601(a)(11) RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENTAL UNITS OF OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the laws of the state or governmental unit under which the benefit plan is established).

Name of Retirement Plan\State Governmental Unit\Last Four Digits of Identifying Number
-NONE-

12. NCGS 1C-1601(a)(12) ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor).

Type of Support\Amount\Location of Funds
-NONE-

13. TENANCY BY THE ENTIRETY. The following property is claimed as exempt pursuant to 11 U.S.C. § 522 and the law of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of	Market	Lien	Amount	Net
Property and Address	<u>Value</u>	<u>Holder</u>	<u>of Lien</u>	<u>Value</u>
-NONE-				

VALUE CLAIMED AS EXEMPT: \$ 0.00

14. NORTH CAROLINA PENSION FUND EXEMPTIONS

-NONE-	

15. OTHER EXEMPTIONS CLAIMED UNDER LAWS OF THE STATE OF NORTH CAROLINA

	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	000.00
a.	§ 1-362	200.00
	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	
b.	§ 1-362	25.00
	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	
C.	§ 1-362	500.00
	Debtor earnings necessary to support family (all earnings from last 60 days), N.C. Gen. Stat.	
d.	§ 1-362	7.00

16. FEDERAL PENSION FUND EXEMPTIONS

	-NONE-	
1	11011=	

17. OTHER EXEMPTIONS CLAIMED UNDER NONBANKRUPTCY FEDERAL LAW

- 1	-NONE-	l l
- 1	-N()NF-	

- 18. RECENT PURCHASES
- (a). List tangible personal property purchased by the debtor within ninety (90) days of the filing of the bankruptcy petition.

Description	Market <u>Value</u>	Lien Holder	Amount of Lien	Net <u>Value</u>
-NONE-				

(b). List any tangible personal property from 18(a) that is directly traceable to the liquidation or conversion of property that may be exempt and that was not acquired by transferring or using additional property.

Description of Replacement Property	Description of Property Liquidated or Converted that May Be Exempt

- 19. The debtor's property is subject to the following claims:
- a. Of the United States or its agencies as provided by federal law.
- b. Of the State of North Carolina or its subdivisions for taxes, appearance bonds or fiduciary bonds;
- c. Of a lien by a laborer for work done and performed for the person claiming the exemption, but only as to the specific property affected.
- d. Of a lien by a mechanic for work done on the premises, but only as to the specific property affected.
- e. For payment of obligations contracted for the purchase of specific real property affected.
- f. For contractual security interests in specific property affected; provided, that the exemptions shall apply to the debtor's household goods notwithstanding any contract for a nonpossessory, nonpurchase money security interest in any such goods.
- g. For statutory liens, on the specific property affected, other than judicial liens.
- h. For child support, alimony or distributive award order pursuant to Chapter 50 of the General Statutes of North Carolina.
- i. For criminal restitution orders docketed as civil judgments pursuant to G.S. 15A-1340.38.
- j. Debts of a kind specified in 11 U.S.C. § 523(a)(1) (certain taxes), (5) (domestic support obligations).
- k. Debts of a kind specified in 11 U.S.C. § 522(c).

Olaina	Nature of	Amount of		Value	Net
Claimant	<u>Claim</u>	<u>Claim</u>	<u>Property</u>	of Property	<u>Value</u>
First Investors Financial	Agreement, Certificat		2014 Honda CR-V 120000		
Services	e of Title	12,000.00	miles	11,525.00	0.00
	Agreement, Certificat		2015 Ram 1500 80000		
Regional Acceptance Co	e of Title	21,200.00	miles	20,450.00	0.00
	Agreement, Certificat		2018 Dodge Journey		
AmeriCredit/GM Financial	e of Title	19,179.00	25000 miles	15,000.00	0.00
	Agreement,Purchas		Bed and 3 Televisions		
Conn's HomePlus	e Money Security	2,000.00	financed by Conn's.	700.00	0.00
	Agreement, Purchas		Living room suite		
Conns	e Money Security	1,800.00	financed by Conns.	800.00	0.00

None of the property listed in paragraph 18(a), except qualified replacement property under 18(b), has been included in this claim of exemptions.

None of the claims listed in paragraph 19 is subject to this claim of exemptions.

I declare that to the extent any exemptions I have claimed appear on its face to exceed the amount allowed by the applicable statute, I claim only the maximum amount allowed by statute.

UNSWORN DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF INDIVIDUAL TO SCHEDULE C-1 - PROPERTY CLAIMED AS EXEMPT

We, <u>Gregory Paul Nichols and Teresa D. Nichols</u>, declare under penalty of perjury that I have read the foregoing Schedule C-1 - Property Claimed as Exempt, consisting of 4 sheets, and that they are true and correct to the best of my knowledge, information and belief.

Executed on: July 26, 2019	/s/ Gregory Paul Nichols
	Gregory Paul Nichols
	Debtor
	/s/ Teresa D. Nichols
	Teresa D. Nichols
	Debtor 2

						•	
Fill	in this information t	o identify you	ur case:				
Deb	tor 1 Gre	gory Paul N	ichols				
	First N		Middle Name	Last Name		-	
	tor 2 Tere	esa D. Nicho	Middle Name	Last Name		-	
	g)						
Unit	ed States Bankruptcy	y Court for the	: EASTERN DISTRICT OF NO	RTH CAROLIN	A	-	
Cas	e number					☐ Check	c if this is an
(,					_	ded filing
Off	icial Form 106	D					
Sc	hedule D: C	_ reditors	Who Have Claims	Secureo	by Propert	V	12/15
is ne			If two married people are filing toget out, number the entries, and attach it				
	any creditors have cla	aims secured b	v vour property?				
			his form to the court with your othe	r schedules. Yo	ou have nothing else t	to report on this form.	
	_		,	r correction in	od navo notimig oloo	to report on the remin	
	Yes. Fill in all of th		below.				
Par	1: List All Secur	ed Claims			Column A	Column B	Column C
			more than one secured claim, list the cr				
			s a particular claim, list the other credito ical order according to the creditor's nar		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	AmeriCredit/GM				value of collateral.	claim	If any
2.1	Financial		Describe the property that secures	the claim:	\$19,179.00	\$15,000.00	\$4,179.00
	Creditor's Name		2018 Dodge Journey 25000	miles			-
	Attn: Bankruptc	у	As of the date you file, the claim is	: Check all that			
	Po Box 183853	.006	apply.	- Ondon an inat			
	Arlington, TX 76		☐ Contingent				
	Number, Street, City, State	e & Zip Code	☐ Unliquidated				
Who	owes the debt? Che	ck one	☐ Disputed Nature of lien. Check all that apply.				
_	Debtor 1 only	ok one.	_				
_	Debtor 2 only		An agreement you made (such as car loan)	s mortgage or sec	curea		
_	Debtor 2 only Debtor 1 and Debtor 2 or	alv	☐ Statutory lien (such as tax lien, me	ochanic's lion)			
_	at least one of the debtor	•	☐ Judgment lien from a lawsuit	echanic's lien)			
	Check if this claim related community debt		Other (including a right to offset)	Certificate	of Title		
		Opened 03/19 Last					

Last 4 digits of account number

8776

Active

Date debt was incurred 6/15/19

Debto	r 1 🧿	Gregory P	aul Nichols		C	Case number (if known)		
		irst Name	Middle N	ame Last Name		_		
Debto		Teresa D.						
	F	irst Name	Middle N	ame Last Name				
2.2	Conn	's HomeP	Plus	Describe the property that secu	res the claim:	\$2,000.00	\$700.00	\$1,300.00
		's Name	iny Dont	Bed and 3 Televisions fin Conn's.	nanced by			
ı	Po Bo	Bankrupt ox 2358 mont, TX		As of the date you file, the claim apply. Contingent	n is: Check all that			
		, Street, City, City	tate & Zip Code	☐ Unliquidated ☐ Disputed Nature of lien. Check all that ap	nl.			
■ Det	otor 1 d	only	песк опе.	An agreement you made (such car loan)		cured		
☐ Del	otor 1 a east or eck if t	and Debtor 2	tors and another	☐ Statutory lien (such as tax lien☐ Judgment lien from a lawsuit☐ Other (including a right to offse	D	Money Security		
		as incurred	Opened 02/16 Last Active 7/30/18	Last 4 digits of account				
	Conn			Describe the property that secu		\$1,800.00	\$800.00	\$1,000.00
	Attn:	's Name Bankrupt Irtment	су	Living room suite financ Conns.	_			
 	Po Bo Dalla	ox 815867 s, TX 752	34	As of the date you file, the claim apply. Contingent	n is: Check all that			
		the debt? Cl	tate & Zip Code heck one.	☐ Unliquidated☐ Disputed☐ Unliquidated☐ Disputed☐ Nature of lien. Check all that ap	ply.			
□ Deb		•		An agreement you made (such car loan)	h as mortgage or sec	cured		
☐ At I	east or	and Debtor 2 ne of the deb this claim re nity debt	tors and another	☐ Statutory lien (such as tax lien ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset		Money Security		
Date d	ebt wa	as incurred	Opened 09/17 Last Active 7/30/18	Last 4 digits of account	number <u>9630</u>			

Debtor 1 Gregory Paul Nichols		Case number (if known)		
First Name Middle N	ame Last Name			
Debtor 2 Teresa D. Nichols				
First Name Middle N	ame Last Name			
2.4 First Investors Financial Services	Describe the property that secures the claim	s12,000.00	\$11,525.00	\$475.00
Creditor's Name	2014 Honda CR-V 120000 miles			
Attn: Bankruptcy 380 Interstate N Parkway, Suite 300 Atlanta, GA 30399	As of the date you file, the claim is: Check all tapply. Contingent	hat		
Number, Street, City, State & Zip Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage car loan)	or secured		
☐ Debtor 1 and Debtor 2 only	\square Statutory lien (such as tax lien, mechanic's I	ien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	cate of Title		
Opened 03/16 Last Active Date debt was incurred 4/24/19	Last 4 digits of account number 0	001		
2.5 Home Point Financial Corporation	Describe the property that secures the claim	s129,993.00	\$160,000.00	\$0.00
Creditor's Name Attn: Correspondence Dept	533 Omaha Drive Broadway, NC 27505 Harnett County			
11511 Luna Road; Suite 200 Farmers Branch, TX 75234	As of the date you file, the claim is: Check all tapply. Contingent	hat		
Number, Street, City, State & Zip Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage	or secured		
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's I	ien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	of Trust		
Opened 09/16 Last Active 3/08/19	Last 4 digits of account number0	327		

Debtor 1	Gregory P	aul Nichols				Case number (if known)		
	First Name	Middle N	ame	Last Name				
Debtor 2	Teresa D.	Nichols						
	First Name	Middle N	ame	Last Name				
2.6 Re	gional Acce	eptance Co	Describe t	the property that secure	s the claim:	\$21,200.00	\$20,450.00	\$750.00
	itor's Name	•	2015 Ra	m 1500 80000 mile	S			
			As of the	date you file, the claim is	S: Chock all that			
). Box 6142	=	apply.	uate you me, the claim is	5. Check all that			
Ra	eigh, NC 27	7661	☐ Conting	gent				
Num	ber, Street, City, S	State & Zip Code	☐ Unliqui	dated				
			☐ Dispute	ed				
Who owe	s the debt? C	check one.	Nature of	lien. Check all that apply	<i>'</i> .			
☐ Debtor	1 only		An agre	eement you made (such a	s mortgage or	secured		
☐ Debtor	2 only		car loa	an)				
■ Debtor	1 and Debtor 2	? only	☐ Statuto	ry lien (such as tax lien, m	nechanic's lien)		
☐ At leas	t one of the deb	otors and another	☐ Judgme	ent lien from a lawsuit				
	if this claim re nunity debt	elates to a	Other (including a right to offset)	Certifica	ate of Title		
Date debt	was incurred	4/2016	Las	st 4 digits of account nu	mber <u>490</u>)1		
Add the	dollar value of	f vour entries in C	olumn A on	this page. Write that nu	mber here:	\$186,1	72.00	
		•		alue totals from all page		\$186,1		
Write th	at number her	e:				\$100,1	72.00	
Part 2:	List Others t	o Be Notified fo	or a Debt Ti	hat You Already Liste	ed			
Use this r	age only if you	u have others to b	e notified al	bout your bankruptcy fo	r a debt that y	you already listed in Part 1	. For example, if a coll	ection agency is
trying to	collect from yo	u for a debt you o	we to some	one else, list the credito	r in Part 1, an	nd then list the collection a	gency here. Similarly,	if you have more
		y of the debts that Il out or submit the		in Part 1, list the addition	nal creditors	here. If you do not have ac	lditional persons to be	notified for any
uents iii r	art i, do not ii	iii out or sublilit ti	iis page.					
∐ _{Na}	me, Number, St	treet, City, State &	Zip Code		On	which line in Part 1 did you e	enter the creditor? 2.5	
	itchens Lav		,		On	willon lille in Fait i uld you e	inter the creditor?	<u> </u>
Jo	seph J. Voi	nnegut, Esq.			Las	t 4 digits of account number		
PC	Box 2505	•				-		
Fa	yetteville, N	NC 28302						

31	l in this inform	ation to identify your	case:						
De	ebtor 1	Gregory Paul Nic		dle Name	Last Name				
De	ebtor 2	Teresa D. Nichols							
(Sp	ouse if, filing)	First Name	Midd	dle Name	Last Name				
Ur	nited States Ban	kruptcy Court for the:	EASTER	RN DISTRICT O	F NORTH CAROLINA				
_									
	nse number						☐ Chec	k if this is ar	n
							_	nded filing	
\sim	Kinin I Farma	400E/E							
	ficial Form	<u>106E/F</u> 'F: Creditors W	lha Hav	vo Uneccu	rad Claims			12/1	5
		accurate as possible. Us				2 for creditors with NC	NPPIOPITY claims		
Sch Sch left. nan	edule G: Executoredule D: Creditoredule	acts or unexpired leases ory Contracts and Unexp rs Who Have Claims Sec inuation Page to this pag ber (if known). of Your PRIORITY Un	ired Leases ured by Pro je. If you ha	s (Official Form 10 operty. If more sp ove no information	06G). Do not include any ace is needed, copy the	v creditors with partially Part you need, fill it ou	r secured claims tha t, number the entries	t are listed in s in the boxes	n s on the
1.	Do any creditor	s have priority unsecure	d claims ag	jainst you?					
	☐ No. Go to Pa	rt 2.							
	Yes.								
2.	identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde nan one creditor holds a pa	as both priori er according	ity and nonpriority to the creditor's na	amounts, list that claim he ame. If you have more that	ere and show both priority	and nonpriority amou	unts. As much	n as
	(For an explanat	ion of each type of claim,	see the instru	uctions for this forr	m in the instruction bookle				
						Total claim	Priority amount	Nonpriori amount	ity
2.1		of Revenue		Last 4 digits of	account number 7714	\$213.0	0 \$213.0	0	\$0.00
	•	ditor's Name nkruptcy Unit		When was the	debt incurred?				
	PO Box						_		
		NC 27602-1168 eet City State Zip Code		As of the date v	you file, the claim is: Che	ock all that apply			
		the debt? Check one.		Contingent	you me, me claim is. One	ск ан шасарру			
	Debtor 1 on			_					
		•		☐ Unliquidated					
	Debtor 2 on			☐ Disputed					
	Debtor 1 an	nd Debtor 2 only		Type of PRIORI	ITY unsecured claim:				
	☐ At least one	e of the debtors and another	er	☐ Domestic sup	pport obligations				
	☐ Check if th	is claim is for a commu	nity debt	Taxes and ce	ertain other debts you owe	the government			
	Is the claim su	ubject to offset?		☐ Claims for de	eath or personal injury whi	le you were intoxicated			
	■ No			Other. Speci	fy				
	☐ Yes				Past due incom	e taxes.		_	
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecu	red Claims					
3.	Do any creditor	s have nonpriority unsec	cured claims	s against you?					
	☐ No. You have	e nothing to report in this p	art. Submit t	this form to the cou	urt with your other schedul	es.			
	■ Yes.								
4.	List all of your	nonpriority unsecured cl	aims in the	alphabetical orde	er of the creditor who bo	olds each claim. If a cros	ditor has more than or	ne nonnriority	
~ .	unsecured claim	, list the creditor separately r holds a particular claim, I	y for each cla	aim. For each clair	m listed, identify what type	of claim it is. Do not list	claims already include	ed in Part 1. Íf	

Total claim

Official Form 106 E/F

	1 Gregory Paul Nichols 2 Teresa D. Nichols		Case number (if known)	
4.1	I C System Inc	Last 4 digits of account number	4693	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy P.O. Box 64378	When was the debt incurred?	Opened 08/18	
	St. Paul, MN 55164 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Collection Anesthesio	Attorney American logy Of Nor	
4.2	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$2,811.00
	Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005	When was the debt incurred?	Opened 12/17 Last Active 6/30/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		
		Educationa	l	
4.3	MOHELA Nonpriority Creditor's Name	Last 4 digits of account number	0001	\$1,817.00
	Attn: Bankruptcy 633 Spirit Dr	When was the debt incurred?	Opened 12/17 Last Active 6/30/19	
	Chesterfield, MO 63005 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Educationa	I	

Official Form 106 E/F

	1 Gregory Paul Nichols 2 Teresa D. Nichols		Case number (if known)	
4.4	MOHELA	Last 4 digits of account number	0003	\$85.00
-	Nonpriority Creditor's Name Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim in	Opened 02/18 Last Active 6/30/19	
	Who incurred the debt? Check one.	7.6 of the date you me, the claim.	e. Chook an that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	☐ Other. Specify		
		Educationa	I	
4.5	Portfolio Recovery Nonpriority Creditor's Name	Last 4 digits of account number	9797	\$130.00
	Attn: Bankruptcy 120 Corporate Blvd	When was the debt incurred?	Opened 12/18	
-	Norfold, VA 23502 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	■ Other. Specify Factoring C Bank Usa N	Company Account Capital One I.A.	
4.6	Verizon Wireless Nonpriority Creditor's Name	Last 4 digits of account number	0001	Unknown
	Attn: Bankruptcy 500 Technology Dr, Ste 550 Weldon Spring, MO 63304	When was the debt incurred?	Opened 06/16 Last Active 11/30/18	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify		

Official Form 106 E/F

or 1 Gregory Paul Nichols Or 2 Teresa D. Nichols	Case number (if known)	
Web Bank Fingerhut	Last 4 digits of account number 4988	\$400.00
Nonpriority Creditor's Name	When was the debt incurred?	
6250 Ridgewood Road Saint Cloud. MN 56303	when was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card purchases.	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	213.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	213.00
	6f.	Student loans	6f.	\$	Total Claim
Total	OI.	Student loans	Oi.	Φ	4,713.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	530.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	5,243.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Gregory Paul Nic	hols		
	First Name	Middle Name	Last Name	
Debtor 2	Teresa D. Nichols	3		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	DF NORTH CAROLINA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Oity		Oldio	211 0000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	- ity		Ciaio	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

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						•
Fill in thi	s informa	tion to identify your	case:			
Debtor 1		Gregory Paul Nic	hols			
	•	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ilina)	Teresa D. Nichol	Middle Name	Last Name		
	•					
United St	ates Banki	ruptcy Court for the:	EASTERN DISTRICT O	DF NORTH CAROLINA		
Case nur	mber					
(if known)						Check if this is an amended filing
						1 amended ming
Officia	al Forr	n 106H				
Sche	dule F	I: Your Cod	lebtors			12/15
fill it out,	and numb	er the entries in the		n the Additional Page t		needed, copy the Additional Page, op of any Additional Pages, write
1. Do	you have	any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No	0					
□ Ye	=					
Arizo ■ No □ Ye	ona, Califor o. Go to line es. Did you	nia, Idaho, Louisiana e 3. r spouse, former spo	, Nevada, New Mexico, Pับ use, or legal equivalent liv	erto Rico, Texas, Wash	ngton, and Wisconsin.	ty states and territories include) ng with you. List the person shown
in lin Form	e 2 again	as a codebtor only	if that person is a guarar	tor or cosigner. Make	sure you have listed t	the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
		: Your codebtor per, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt les that apply:
3.1					☐ Schedule D, lir	ne
	Name				☐ Schedule E/F,	
					☐ Schedule G, lin	
	Number	Street			_	
	City		State	ZIP Code		
3.2					☐ Schedule D, lir	20
3.2	Name				Schedule E/F,	
					☐ Schedule C, lir	
	Number	Street			_	
	City		State	ZIP Code		

Fill in this informa	ation to identify your case:	
Debtor 1	Gregory Paul Nichols	
Debtor 2 (Spouse, if filing)	Teresa D. Nichols	
United States Bar	nkruptcy Court for the: EASTERN DISTRICT OF NORTH CAROLINA	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	orm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed	■ Employed □ Not employed
	employers.	Occupation	Electro Mechanic	Credentialing Officer
	Include part-time, seasonal, or self-employed work.	Employer's name	COTY US, LLC	Cape Fear Ctr. for Digest. Disease
	Occupation may include student or homemaker, if it applies.	Employer's address	350 5th Avenue 19th Floor New York, NY 10118	1880 Quiet Cv Fayetteville, NC 28304
		How long employed th	nere? 6 years	3 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,392.33 \$ 3,453.98

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 5,392.33 \$ 3,453.98

Official Form 106l Schedule I: Your Income page 1

Deb Deb	tor 1 tor 2	Gregory Paul Nichols Teresa D. Nichols	_	Ca	ase number (if known)	-			
				F	For Debtor 1			Debtor 2 or Filing spouse	
	Cop	by line 4 here	4.	(5,392.33	-	\$	3,453.98	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	9		_	\$	598.45	
	5b.	Mandatory contributions for retirement plans	5b.		\$0.00	_	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.		\$107.90	_	\$	103.62	
	5d.	Required repayments of retirement fund loans	5d.	9	\$0.00	_	\$	0.00	
	5e.	Insurance	5e.	9	\$ 612.23		\$	190.26	
	5f.	Domestic support obligations	5f.	9	\$ 0.00	-	\$	0.00	
	5g.	Union dues	5g.	9	\$ 0.00		\$	0.00	
	5h.	Other deductions. Specify: Life and disability insurance	5h.+	- 9	\$ 44.73	+	\$	0.00	
		401(k) loan repayment	_	9	\$ 267.89	_	\$	0.00	
		HSA	_		\$ 423.07	_	\$	0.00	
^	A -I -			\$		-	· · · · · ·		
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	Ψ	2,102.00	_	\$	892.33	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,239.75	_	\$	2,561.65	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	9	\$ 0.00		\$	0.00	
	8b.	Interest and dividends	8b.		\$ 0.00	_	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		3		-	\$	0.00	
	8d.	Unemployment compensation	8d.		\$ 0.00	_	\$	0.00	
	8e.		8e.		:	_	\$		
	8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:		,	\$ 0.00	-	\$ \$	0.00	
	8g.	Pension or retirement income	8g.	9	\$ 0.00		\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- 9	\$ 0.00	+	\$	0.00	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00		\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,239.75 + \$	_	2,56	61.65 = \$	5,801.40
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify:	depen		.,	,		chedule J. 11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certallies							5,801.40
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?					Combine monthly	
		Yes. Explain:				_			

EHII	in this informs	ation to identify yo	our caca:			I		
	otor 1					Ohaa	l. if alsis is.	
Den	ntor r	Gregory Pau	II NICNOIS	i			k if this is: An amended filing	
	otor 2 ouse, if filing)	Teresa D. Ni	chols				A supplement shown 13 expenses as of	ving postpetition chapter the following date:
Unit	ted States Bank	ruptcy Court for the	: EASTE	RN DISTRICT OF NORTH	I CAROLINA	_	MM / DD / YYYY	
	se number nown)							
O	fficial Fo	rm 106J						
S	chedule	J: Your	Exper	ises				12/1
Be info	as complete ormation. If m	and accurate as	s possible. eded, atta	If two married people ar ch another sheet to this				
Par		ribe Your House	hold					
1.	Is this a join							
	□ No. Go to	o line 2. e s Debtor 2 live i	in a senar	ate household?				
	= 103. D 00		iii a sepair	ate flouseffold:				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Debt	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state				Son		17	□ No
	dependents	names.			3011			■ Yes □ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	expenses o	penses include of people other to d your depende	han _	No Yes				
Par	t 2: Estim	nate Your Ongoi	ng Monthi	y Expenses				
exp		a date after the l		uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i luded it on <i>Schedule I:</i>)			Your exp	enses
•		,						
4.	The rental of payments ar	or home owners and any rent for the	hip expen e ground o	ses for your residence. I r lot.	nclude first mortgage	e 4. \$		875.28
	If not include	ded in line 4:						
	4a. Real	estate taxes				4a. \$		0.00
	•	erty, homeowner's				4b. \$		10.00
		e maintenance, re eowner's associat		ıpkeep expenses dominium dues		4c. \$ 4d. \$		0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

Debto		Gregory Paul Nichols Teresa D. Nichols	Case num	ber (if known)	
				` ′ =	
	Utilitie 6a.	es: Electricity, heat, natural gas	6a.	\$	170.00
		Water, sewer, garbage collection	6b.		48.00
		Telephone, cell phone, Internet, satellite, and cable services	6c.		323.00
		Other. Specify: Garbage pickup	6d.	·	20.00
		and housekeeping supplies	— 7.	· -	1,200.00
		care and children's education costs	8.	\$	30.00
		ng, laundry, and dry cleaning	9.	\$	50.00
		nal care products and services	10.		50.00
		al and dental expenses	11.	\$	300.00
		portation. Include gas, maintenance, bus or train fare.			
		include car payments.	12.	\$	500.00
		ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	170.00
14. (Charit	able contributions and religious donations	14.	\$	80.00
-	Insura				
		t include insurance deducted from your pay or included in lines 4 or 20.	150	c	0.00
		Life insurance	15a. 15b.	·	0.00
		Health insurance Vehicle insurance	15b. 15c.	·	0.00
					228.00
		Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20.	15d.	Ф	0.00
		y: Personal Property Taxes	16.	\$	35.00
		ment or lease payments:		·	
		Car payments for Vehicle 1	17a.	\$	402.00
1	17b.	Car payments for Vehicle 2	17b.	\$	0.00
1	17c.	Other. Specify:	17c.	\$	0.00
		Other. Specify:	17d.	\$	0.00
18. \	Your p	payments of alimony, maintenance, and support that you did not report as		_	
		ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
		payments you make to support others who do not live with you.		\$	0.00
	Specif	,	19.	-	
		real property expenses not included in lines 4 or 5 of this form or on Schell Mortgages on other property	<i>auie I: Yo</i> 20a.		0.00
		Real estate taxes	20a. 20b.	•	0.00
		Property, homeowner's, or renter's insurance	20b.	·	0.00
		Maintenance, repair, and upkeep expenses	20d.	·	0.00
		Homeowner's association or condominium dues	20d. 20e.		0.00
		: Specify:		+\$	0.00
Z1. (Othier.			-Ψ	0.00
		late your monthly expenses			
		dd lines 4 through 21.		\$	4,491.28
2	22b. C	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	4,491.28
23 (Calcul	late your monthly net income.			
		Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,801.40
		Copy your monthly expenses from line 22c above.	23b.	•	4,491.28
-		T-F, , T-S	200.	*	7,731.20
2	23c.	Subtract your monthly expenses from your monthly income.			
		The result is your monthly net income.	23c.	\$	1,310.12
F r	For exa	u expect an increase or decrease in your expenses within the year after your parple, do you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage?			e or decrease because of a
	□	Evolain hara:			

Fill in this inform	nation to identify your	case:		
Debtor 1	Gregory Paul Nic	hols		
	First Name	Middle Name	Last Name	
Debtor 2	Teresa D. Nichol	S		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA	
Case number				☐ Check if this is an amended filing
Official Form Declarat i		an Individual	Debtor's Schedules	12/15
If two married pe	ople are filing togethe	r, both are equally respon	sible for supplying correct information.	
obtaining money		in connection with a bankr	or amended schedules. Making a false s ruptcy case can result in fines up to \$25	
Sign	Below			
Did you pay	or agree to pay some	eone who is NOT an attorn	ey to help you fill out bankruptcy forms	5?
■ No				
_			A 1	
☐ Yes. N	ame of person			Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119)
	ty of perjury, I declare true and correct.	that I have read the sumn	nary and schedules filed with this decla	ration and
X /s/ Gred	gory Paul Nichols		X /s/ Teresa D. Nichols	
	y Paul Nichols		Teresa D. Nichols	
	e of Debtor 1		Signature of Debtor 2	
Date I	uly 26, 2019		Date July 26 2019	

Fill i	n this inforr	nation to identify you	r case:			
Debt	tor 1	Gregory Paul Ni	chols			
5		First Name	Middle Name	Last Name		
Debt (Spou	or 2 se if, filing)	Teresa D. Nicho	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	NORTH CAROLINA		
		aproy Court to: u.o.				
(if kno	e number 				_	heck if this is an mended filing
		rm 107 of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/19
infori	mation. If m		attach a separate sheet to		equally responsible for sup y additional pages, write you	
Part	1: Give [Details About Your Ma	rital Status and Where You	Lived Before		
1. \	What is you	r current marital statu	ıs?			
	■ Married□ Not man					
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	-		·	•		
I	■ No □ Yes. Lis	st all of the places you I	ived in the last 3 years. Do n	ot include where you live now	<i>1</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Explai	in the Sources of You	r Income			
ı	Fill in the tota	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including partetogether, list it only once ur		ndar years?
1	□ No ■ Yes. Fil	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$32,353.96	■ Wages, commissions, bonuses, tips	\$20,723.86
			☐ Operating a business		☐ Operating a business	

Official Form 107

		resa D. Nichols			Ca	se number (if known)		
			Debtor 1			Debtor 2		
			Sources	of income I that apply.	Gross income (before deductions and exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
	r last caler anuary 1 to	ndar year: December 31, 20	Wage bonuses	es, commissions, tips	\$57,859.00	■ Wages, combonuses, tips	nmissions,	\$33,350.00
			☐ Opera	ating a business		☐ Operating a	business	
		dar year before t December 31, 20		es, commissions, tips	\$64,480.79	■ Wages, combonuses, tips	nmissions,	\$31,801.31
			☐ Opera	ating a business		Operating a	business	
	List each	, ,	,	Ź	ou received together, list it	,		
			Debtor 1			Debtor 2		
			Sources Describe	of income below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Paymen	its You Made Bef	ore You Filed for	Bankruptcy			
6.	□ No.	Neither Debtor individual primar During the 90 da No. Go of No. Go of No. Subject to adjuice During the 90 da No. Go of Yes List includes	1 nor Debtor 2 had a personal, anys before you filed to line 7. below each credit that creditor. Do a personal that creditor. Do a personal that creditor and the control of the control o	family, or household for bankruptcy, did for bankruptcy, did not include paymento an attorney for the 2 and every 3 years or e primarily consult for bankruptcy, did not to whom you paidomestic support of	Imer debts. Consumer debted purpose." In dyou pay any creditor a total of \$6,825* or more attended to the for domestic support oblinis bankruptcy case. In a safter that for cases filed on the first support of the first support oblinis bankruptcy case.	e in one or more paying ations, such as changed in or after the date of all of \$600 or more?	ore? yments and the support a	the total amount you and alimony. Also, do t.
	Creditor	's Name and Add	ress	Dates of payme		Amount you still owe	Was this	payment for
	P.O. Bo	al Acceptance (x 61427 , NC 27661	Co	5/2/2019; 5/13/2019 and 6/3/2019.	paid \$1,872.96	\$21,200.00		

	otor 1 Gregory Paul Nichols Teresa D. Nichols		Cas	se number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096	Last three regular monthly payments.	\$1,206.00	\$19,179.00	☐ Mortgag ■ Car ☐ Credit C ☐ Loan Re ☐ Supplier ☐ Other	ard epayment es or vendors
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. It alimony.	artners; relatives of any ger n control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a gener ny managing a	ral partner; corporatior agent, including one for
	No Yes. List all payments to an insider.					
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	r this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos ■ No □ Yes. List all payments to an insider		ments of transfer of	any property on a		iost mai senemed a
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe		r this payment ditor's name
Pa	,,					
Pa 9.	Insider's Name and Address	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include cree	ditor's name ding?
	Insider's Name and Address Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title	ns, and Foreclosures	paid ny lawsuit, court ac	still owe	Include cree	ditor's name ding? rt or custody
9.	Insider's Name and Address 14: Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.	ns, and Foreclosures tcy, were you a party in any cases, small claims action Nature of the case	paid ny lawsuit, court ac is, divorces, collection Court or agency	still owe	rative proceed actions, suppositions.	ditor's name ding? rt or custody he case
9.	Insider's Name and Address 14: Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11.	ns, and Foreclosures tcy, were you a party in any cases, small claims action Nature of the case tcy, was any of your propow. Describe the Property	paid ny lawsuit, court acts, divorces, collection Court or agency erty repossessed, for	still owe	rative proceed actions, suppositions.	ditor's name ding? rt or custody he case ed, seized, or levied?
9.	Insider's Name and Address Identify Legal Actions, Repossessio Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.	ns, and Foreclosures tcy, were you a party in any cases, small claims action Nature of the case tcy, was any of your propow.	paid ny lawsuit, court acts, divorces, collection Court or agency erty repossessed, for the court of the c	still owe stion, or administration suits, paternity a foreclosed, garnis Date Over	Include creative proceed actions, supposed the status of the shed, attached attached attached attached attached attached attached.	ditor's name ding? rt or custody he case

Debt Debt		Gregory Paul Nichols Teresa D. Nichols		Case number	(if known)	
á	acco	unts or refuse to make a payment b		did any creditor, including a bank or financial in you owed a debt?	stitution, set off any a	mounts from your
	_	No Yes. Fill in the details.				
		litor Name and Address	Des	scribe the action the creditor took	Date action was	Amount
	Ciec	ntor Name and Address	Des	scribe the action the creditor took	taken	Amount
		n 1 year before you filed for bankru -appointed receiver, a custodian, o		as any of your property in the possession of an er official?	assignee for the bene	fit of creditors, a
ı	•	No				
[□ `	Yes				
Part	5:	List Certain Gifts and Contribution	s			
13. \	_	n 2 years before you filed for bankr No	uptcy, c	lid you give any gifts with a total value of more t	han \$600 per person?	,
[□ `	Yes. Fill in the details for each gift.				
		s with a total value of more than \$60 person	00	Describe the gifts	Dates you gave the gifts	Value
		on to Whom You Gave the Gift and ress:				
	.	n 2 years before you filed for bankr No Yes. Fill in the details for each gift or c		lid you give any gifts or contributions with a tot	al value of more than s	\$600 to any charity?
		s or contributions to charities that		Describe what you contributed	Dates you	Value
	more Cha	e than \$600 rity's Name ress (Number, Street, City, State and ZIP Code		Describe what you contributed	contributed	Value
Part		List Certain Losses				
15. \	Vithi		ptcy or	since you filed for bankruptcy, did you lose any	thing because of theft	t, fire, other disaster
		M.				
,	_ `	No Yes. Fill in the details.				
		cribe the property you lost and	Descri	be any insurance coverage for the loss	Date of your	Value of property
		the loss occurred	Include	the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.	loss	lost
Part	7:	List Certain Payments or Transfers	S			
c	cons	ulted about seeking bankruptcy or	preparir	d you or anyone else acting on your behalf paying a bankruptcy petition? s, or credit counseling agencies for services require	,, ,	ty to anyone you
Г		No				
i		Yes. Fill in the details.				
	Pers	son Who Was Paid		Description and value of any property	Date payment	Amount of
		ress ill or website address on Who Made the Payment, if Not Y	ou′	transferred	or transfer was made	payment
	455 Suit Car	dford Law Offices Swiftside Drive te 106 y, NC 27512		\$1,000.00 partial attorney fee + \$310.00 filing fee.	\$1,000.00 - 7/18/2019; \$310.00 - 7/25/2019.	\$1,310.00
	ww۱	w.bradford-law.com				

									· ·	
	otor 1 otor 2	Gregory Paul Nichols Teresa D. Nichols				Ca	se number	(if known)		
17.	promi	n 1 year before you filed for bankrupt ised to help you deal with your credit it include any payment or transfer that yo	ors o	r to make payments				or transfer any prope	rty to anyone	who
	_	No ⁄ es. Fill in the details.								
	Perse Addr	on Who Was Paid ress		Description and variansferred	alue of any pr	oper	ty	Date payment or transfer was made		ount of ayment
18.	Includinclud	n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers m e gifts and transfers that you have alrea No Yes. Fill in the details.	ousin ade a	ness or financial affa as security (such as	airs? the granting of a					-
	Addr	on Who Received Transfer ress on's relationship to you		Description and very property transfer				any property or received or debts change	Date transfe made	er was
19.	benef	n 10 years before you filed for bankru iiciary? (These are often called asset-propose) No Yes. Fill in the details.			ny property to a	a self	f-settled tr	ust or similar device	of which you	are a
	Name	e of trust		Description and v	alue of the pro	opert	y transferr	red	Date Transf made	er was
Par	t 8:	List of Certain Financial Accounts, Ir	strui	ments, Safe Deposi	t Boxes, and S	itoraç	ge Units			
20.	sold, include house	n 1 year before you filed for bankruptomoved, or transferred? de checking, savings, money market, es, pension funds, cooperatives, asso No Yes. Fill in the details.	or ot	her financial accou	nts; certificate	s of o			•	•
		e of Financial Institution and 'ess (Number, Street, City, State and ZIP		st 4 digits of count number	Type of acco	ount (clo	nte account was osed, sold, oved, or unsferred	before clo	alance sing or ransfer
21.	cash,	ou now have, or did you have within 1 or other valuables? No (es. Fill in the details.	year	before you filed for	r bankruptcy, a	any s	afe deposi	t box or other depos	itory for secui	rities,
	Name	e of Financial Institution		Who else had acc	cess to it?	De	scribe the	contents	Do you st	ill
	Addr	'ess (Number, Street, City, State and ZIP Code)		Address (Number, S	Street, City,				have it?	

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

■ No

☐ Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

	otor 2 Teresa D. Nichols		Case number (if known)	
Par	t 9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someofor someone.	ne else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
	■ No □ Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10: Give Details About Environmental Informa	ition		
For	the purpose of Part 10, the following definitions a	apply:		
	Environmental law means any federal, state, or l toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, ground	- •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wher	they occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	trative proceeding under any envi	ronmental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or Con	nections to Any Business		
27.	Within 4 years before you filed for bankruptcy, d	lid you own a business or have an	y of the following connections to any	/ business?
	☐ A sole proprietor or self-employed in a to	rade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing executi	ive of a corporation		
	☐ An owner of at least 5% of the voting or	equity securities of a corporation		

Dek	otor 2 Teresa D. Nichols	С	ase number (if known)
	■ No. None of the above applies. Go to F □ Yes. Check all that apply above and fill	Part 12. I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	ccy, did you give a financial statement to a	anyone about your business? Include all financial
	■ No □ Yes. Fill in the details below.		
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	

Gregory Paul Nichols

Debtor 1

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Debtor 1	Gregory Paul N	lichols			
Debtor 2	Teresa D. Niche	ols		Case number (if kn	own)
Part 12:	Sign Below				
I have rea	nd the answers on t	his Statement of Financial Affairs	s ar	nd any attachments, and I declare under	penalty of perjury that the answers
				, concealing property, or obtaining mone	ey or property by fraud in connection
			mp	prisonment for up to 20 years, or both.	
18 U.S.C.	§§ 152, 1341, 1519,	and 3571.			
/s/ Greg	ory Paul Nichols	/s/	Te	resa D. Nichols	
Gregory	/ Paul Nichols	Ter	es	a D. Nichols	
Signatur	e of Debtor 1	Sig	nat	ture of Debtor 2	
Date J	uly 26, 2019	Dat	е	July 26, 2019	
Did you a	ttach additional pa	ges to Your Statement of Financi	al i	Affairs for Individuals Filing for Bankrup	tcy (Official Form 107)?
■ No	-	_			
☐ Yes					
Did you p	ay or agree to pay	someone who is not an attorney	to l	help you fill out bankruptcy forms?	
■ No					
☐ Yes. Na	ame of Person	. Attach the Bankruptcy Petition F	² rei	parer's Notice, Declaration, and Signature (Official Form 119).

Fill in this inform	nation to identify your case:
Debtor 1	Gregory Paul Nichols
Debtor 2 (Spouse, if filing)	Teresa D. Nichols
United States E	Bankruptcy Court for the: Eastern District of North Carolina
Case number (if known)	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this ement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.
	Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

				Colur Debte		 mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtim payroll deductions).	e, and co	mmissi	ons (before all	\$	5,392.32	\$ 3,453.98
Alimony and maintenance payments. Do not incluColumn B is filled in.	de payme	ents from	a spouse if	\$	0.00	\$ 0.00
All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a spoyou listed on line 3.	ort. Includ	le regula depende	contributions nts, parents,	\$	0.00	\$ 0.00
Net income from operating a business, profession, or farm	Debtoi	1				
Gross receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from a business, profession, or t	farm \$	0.00	Copy here ->	\$	0.00	\$ 0.00
Net income from rental and other real property	Debtoi	1				
Gross receipts (before all deductions)	\$_	0.00				
Ordinary and necessary operating expenses	-\$	0.00				
Net monthly income from rental or other real property	, \$	0.00	Copy here ->	\$	0.00	\$ 0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

	Gregory Paul Nichols Teresa D. Nichols				Case num	ber (if known))		
•									
					Column Debtor 1		Column B Debtor 2 non-filing	or	
7 Inte	rest, dividends, and royalties				\$	0.00	_	0.00	
	mployment compensation				\$	0.00	\$	0.00	
	not enter the amount if you conter Social Security Act. Instead, list it		ed was a bene	efit under					
Fo	or you		0	.00					
Fo	or your spouse	\$	0	.00					
	sion or retirement income. Do refit under the Social Security Act.		eceived that wa	as a	\$	0.00	\$	0.00	
Do n rece dom	ome from all other sources not not include any benefits received sived as a victim of a war crime, a sestic terrorism. If necessary, list of below.	under the Social Security crime against humanity,	Act or payme or international	nts al or					
					\$	0.00	\$	0.00	
					\$	0.00	\$	0.00	
	Total amounts from separate	e pages, if any.		+	\$	0.00	\$	0.00	
	culate your total average month n column. Then add the total for C			\$	5,392.32	+ \$ _	3,453.98	= \$ 8,846.	30_
								Total average monthly incor	ne
Part 2:	Determine How to Measure	rour Deductions from ir	ncome						
12. Cop	y your total average monthly in	como from lino 11							
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	icome nom me m.						\$ 8,846.	30
_	culate the marital adjustment. C	Check one:						\$ 8,846.	<u>30</u>
13. Calc	culate the marital adjustment. C You are not married. Fill in 0 bel	Check one: ow.						\$ <u>8,846.</u>	<u>30</u>
□ ■	culate the marital adjustment. C You are not married. Fill in 0 bel You are married and your spous	Check one: ow. e is filing with you. Fill in						\$ <u>8,846.</u>	<u>30</u>
_	culate the marital adjustment. C You are not married. Fill in 0 bel	Check one: ow. e is filing with you. Fill in e is not filing with you. listed in line 11, Column I	0 below. B, that was NC)T regula	arly paid for	the house	ehold expense	es of you or your	<u>30</u>
□ ■	You are not married. Fill in 0 bel You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column E f the spouse's tax liability uding this income and the	0 below. B, that was NC or the spouse	DT regula 's suppo	arly paid for rt of somec	the house	ehold expense han you or yo	es of you or your ur dependents.	<u>30</u>
□ ■	You are not married. Fill in 0 bel You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column E f the spouse's tax liability uding this income and the	0 below. B, that was NC or the spouse	OT regula 's suppo come de	arly paid for rt of somec	the house	ehold expense han you or yo	es of you or your ur dependents.	<u>30</u>
□ ■	You are not married. Fill in 0 bel You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column E f the spouse's tax liability uding this income and the	0 below. B, that was NC or the spouse	DT regula 's suppo	arly paid for rt of somec	the house	ehold expense han you or yo	es of you or your ur dependents.	30_
□ ■	You are not married. Fill in 0 bel You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column E f the spouse's tax liability uding this income and the	0 below. B, that was NC or the spouse	OT regula 's suppo come de	arly paid for rt of somec	the house	ehold expense han you or yo	es of you or your ur dependents.	30_
□ ■	You are not married. Fill in 0 bel You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column E f the spouse's tax liability uding this income and the	0 below. B, that was NC or the spouse	DT regula's suppo	arly paid for rt of somec	the house	ehold expense han you or yo	es of you or your ur dependents.	30_
□ ■	You are not married. Fill in 0 bel You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column If the spouse's tax liability uding this income and the the state of the spouse.	0 below. B, that was NC or the spouse amount of inc	DT regula's suppo	arly paid for rt of somed voted to ea	the house one other t ach purpos	ehold expense han you or yo	es of you or your ur dependents. y, list additional	0.00
	You are not married. Fill in 0 bell You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment of Below, specify the basis for excladjustments on a separate page If this adjustment does not apply	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column I f the spouse's tax liability uding this income and the the state of the spouse's tax liability uding this income and the state of the spouse's tax liability uding this income and the state of the spouse's tax liability the spouse of the state of the sta	0 below. B, that was NC or the spouse e amount of inc	OT regulars support of the support o	arly paid for rt of somed voted to ea	the house one other t ach purpos	ehold expense han you or yo e. If necessar	es of you or your ur dependents. y, list additional	0.00
14. Yo	You are not married. Fill in 0 bell You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page If this adjustment does not apply Total	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column If the spouse's tax liability uding this income and the the start of the	0 below. B, that was NC or the spouse amount of incomment of the second	OT regulars support of the support o	arly paid for rt of somed voted to ea	the house one other t ach purpos	ehold expense han you or yo e. If necessar	es of you or your ur dependents. y, list additional	0.00
14. Yo	You are not married. Fill in 0 bell You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page If this adjustment does not apply Total Total ur current monthly income. Su lculate your current monthly in	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column If the spouse's tax liability uding this income and the the start of the	0 below. B, that was NC or the spouse amount of income a	DT regulars suppo come de suppo come de suppo su	arly paid for rt of somec voted to ea	the house one other t ich purpos	ehold expense han you or yo e. If necessar copy here=>	es of you or your ur dependents. y, list additional	0.00
14. Yo	You are not married. Fill in 0 bell You are married and your spous You are married and your spous You are married and your spous Fill in the amount of the income dependents, such as payment o Below, specify the basis for excl adjustments on a separate page If this adjustment does not apply Total Total ur current monthly income. Su lculate your current monthly in	Check one: ow. e is filing with you. Fill in the is not filing with you. listed in line 11, Column If the spouse's tax liability uding this income and the the start of the	0 below. B, that was NC or the spouse e amount of inces a mount of inces	DT regulars suppo come de suppo come de suppo su	arly paid for rt of somec voted to ea	the house one other t ich purpos	ehold expense han you or yo e. If necessar copy here=>	es of you or your ur dependents. y, list additional	0.00

16 16	Sa. Fi Sb. Fi Sc. Fi		ne median family income that applies to you	u. Follow these s	teps:		
16	8b. Fi 8c. Fi	ill in th	ne state in which you live.				
	c. Fi			NC	_		
	c. Fi	ill in th	ne number of people in your household.	3	_		
10			ne median family income for your state and siz		_	•	68,853.00
		o find	a list of applicable median income amounts, g tions for this form. This list may also be available	go online using th		\$_	
17. H o	ow d	lo the	lines compare?		•		
17	'a.		Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NO	1 1 0			
17	b.		Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcula your current monthly income from line 14 abo	tion of Your Dis			
Part 3:		Calcu	ulate Your Commitment Period Under 11 U.	S.C. § 1325(b)(4)		
18. C c	ору :	your t	total average monthly income from line 11 .	•		\$	8,846.30
co	nten	d that	marital adjustment if it applies. If you are m t calculating the commitment period under 11 to come, copy the amount from line 13.	narried, your spou	ise is not filing with you, and you		· · · · · · · · · · · · · · · · · · ·
			narital adjustment does not apply, fill in 0 on lin	ne 19a.		-\$	0.00
19	9b. S	ubtra	ct line 19a from line 18.			\$	8,846.30
20. C a	alcul	late y	our current monthly income for the year. F	ollow these step	S:		
20	a. C	opy lii	ne 19b			\$_	8,846.30
	M	lultiply	y by 12 (the number of months in a year).				(12
20	b. T	he res	sult is your current monthly income for the yea	r for this part of t	he form	\$_	106,155.60
20	oc. C	opy th	he median family income for your state and siz	ze of household f	rom line 16c	\$_	68,853.00
21	. H	low d	o the lines compare?				
			ne 20b is less than line 20c. Unless otherwise eriod is 3 years. Go to Part 4.	ordered by the c	ourt, on the top of page 1 of this form, cl	neck box 3,	The commitment
			ne 20b is more than or equal to line 20c. Unlead Commitment period is 5 years. Go to Part 4.	ss otherwise orde	ered by the court, on the top of page 1 of	f this form, c	heck box 4, The
Part 4:		Sign	Below				
Ву	/ sigr	ning h	ere, under penalty of perjury I declare that the	e information on t	his statement and in any attachments is	true and cor	rect.
X /	s/ G	rego	ry Paul Nichols	Х	/s/ Teresa D. Nichols		
(Greg	jory l	Paul Nichols of Debtor 1		Teresa D. Nichols Signature of Debtor 2		
Da			26, 2019 DD / YYYY		Date <u>July 26, 2019</u> MM / DD / YYYY		
lf y	you (check	ed 17a, do NOT fill out or file Form 122C-2.				

Gregory Paul Nichols

						i			
Fill in	this information	to identify you	r case:						
Debtor	Gregor	y Paul Nicho	ls						
Debtor	2 Teresa	D. Nichols							
(Spous	se, if filing)								
United	States Bankruptcy	Court for the:	Eastern Distric	t of North Carolina	a				
Case r (if know	number wn)						☐ Check if t	his is an amen	ded filing
	Form 122C-2 pter 13 Ca	alculatio	n of Your	· Disposal	ble In	ncome			04/19
Γο fill d	out this form, you itment Period (Of	will need you	r completed cop	-			nt Monthly Inc	ome and Calcu	lation of
space i	complete and acc is needed, attach nal pages, write y	a separate sh	eet to this form,	Include the line					
Part 1	Calculate Yo	our Deduction	s from Your Inc	ome					
the	Internal Revenue questions in lines rmation may also	s 6-15. To find	the IRS standar	ds, go online usi					
exp	uct the expense and an are here. The contract the contrac	igher than the s	tandards. Do no	t include any opera	ating exp	enses that you su	btracted from ir	ncome in lines 5	
If yo	ur expenses differ	from month to	month, enter the	average expense.					
Note	e: Line numbers 1-	4 are not used	in this form. The	se numbers apply	to inform	nation required by	a similar form u	sed in chapter 7	cases.
5.	The number of p	eople used in	determining yo	ur deductions fro	om incor	ne			
		of any additiona	l dependents wh	d as exemptions or nom you support. T				3	
Nati	onal Standards	You m	ust use the IRS N	National Standards	s to answ	er the questions ir	n lines 6-7.		
6.				nber of people you ng, and other item		in line 5 and the I	RS National	\$	1,446.00
7.	the dollar amount people who are 6	for out-of-pock 5 or olderbec	et health care. T ause older peopl	e number of people he number of people have a higher IR additional amoun	ple is spl RS allowa	it into two categori ince for health car	iespeople who	are under 65 a	nd

Official Form 122C-2

Debtor 1 Debtor 2		Gregory Paul Nichols Geresa D. Nichols		_	С	ase number (<i>if kı</i>	nown)		
Peo	ple v	who are under 65 years of age							
	7a.	Out-of-pocket health care allowance per person	\$	55					
	7b.	Number of people who are under 65	x	3					
	7c.	Subtotal. Multiply line 7a by line 7b.	\$	165.00		Copy here=>	\$	165.00	
Peo	ple v	who are 65 years of age or older							
	7d.	Out-of-pocket health care allowance per person	\$	114					
	7e.	Number of people who are 65 or older	X	0					
	7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=>	\$	0.00	
	7g.	Total. Add line 7c and line 7f		\$	1(65.00	Сору	total here=>	\$ <u>165.00</u>
		andards You must use the IRS Local Standards to		·					
		n information from the IRS, the U.S. Trustee Prog tcy purposes into two parts:	ram has d	ivided the	IRS Loc	al Standard	for housi	ng for	
_	-	ing and utilities - Insurance and operating expens	ses						
■ H	lous	ing and utilities - Mortgage or rent expenses							
		ver the questions in lines 8-9, use the U.S. Trustee						the link s	pecified in the
8.	Ηοι	e instructions for this form. This chart may also be using and utilities - Insurance and operating expe ne dollar amount listed for your county for insurance a	nses: Usin	g the numl	ber of pe			5, fill	572.00
9.	Ηοι	using and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fillisted for your county for mortgage or rent expenses		lar amount	:		\$	998.00	
	9b.	Total average monthly payment for all mortgages a	nd other de	ebts secure	ed by you	r home.			
		To calculate the total average monthly payment, ad contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60.	d all amour months aft	nts that are ter you file)				
		Name of the creditor	Aver payn	age mont	hly				
		-NONE-	\$						
		9b. Total average monthly paymen	t \$	(^ ^^	Copy here=> -	\$	0.00	Repeat this amount on line 33a.
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) from rent expense). If this number is less than \$0, enter		(mortgage		\$	998.00	Copy here=>	\$\$
10.		ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fill					incorrec	t and	\$
	Ex	plain why:							

Debtor 2		ory Paul Nichols a D. Nichols				Case numb	er (if known)		
11.	Local tra	nsportation expenses	s: Check the number of veh	icles for whi	ch you claim	an owner	ship or operatin	g expense.	
	□ 0. Go	to line 14.							
	☐ 1. Go	to line 12.							
	■ 2 or m	nore. Go to line 12.							
12.			sing the IRS Local Standard perating Costs that apply for						420.00
13.	You may		pense: Using the IRS Loca if you do not make any loan						
Ve	ehicle 1	Describe Vehicle 1:	2015 Ram 1500 80000	miles					
13a	a. Ownersh	ip or leasing costs usin	g IRS Local Standard			\$_	508.00		
13b	•	monthly payment for al	I debts secured by Vehicle 1 vehicles.	l.					
	are contr		y payment here and on line cured creditor in the 60 mor			at			
	Nan	ne of each creditor for	Vehicle 1	Average payment	monthly				
	Reg	gional Acceptance	Co	\$	405.60				
		Total A	Average Monthly Payment	\$	405.60	Copy here =>	-\$40	5.60 Repeat this amount on line 33b.	
130		cle 1 ownership or leas line 13b from line 13a.	e expense if this number is less than \$6	0, enter \$0.		. \$_	102.40	Copy net Vehicle 1 expense here => \$	102.40
Ve	ehicle 2	Describe Vehicle 2:	2018 Dodge Journey 2	25000 mile	es				
130	I. Ownersh	ip or leasing costs usin	g IRS Local Standard			\$_	508.00		
13e	e. Average leased ve	, , ,	I debts secured by Vehicle 2	2. Do not inc	clude costs for	r			
	Nan	ne of each creditor fo	Vehicle 2	Average payment	monthly t				
	Am	eriCredit/GM Finan	cial	\$	335.00				
		Total a	verage monthly payment	\$	335.00	Copy here => -\$	335.0	Repeat this amount on line 33c.	
13f	. Net Vehic	cle 2 ownership or leas	e expense					Copy net Vehicle 2	
	Subtract	line 13e from line 13d.	if this number is less than \$	0, enter \$0.		\$_	173.00	expense here	173.00
14.			e: If you claimed 0 vehicles e allowance regardless of					in the \$	0.00
15.	also dedu	uct a public transportati	on expense: If you claimed on expense, you may fill in val cal Standard for <i>Public Trans</i>	what you be					0.00

Debtor 1 Debtor 2 Gregory Paul Nichols
Teresa D. Nichols
Case number (if known)

Oth	er Neces		n addition to the expense he following IRS categorie		ns listed above	, you are allowed your monthly expense:	s for	
16.	self-emp your pagand sub	ployment taxes, socia y for these taxes. Ho	al security taxes, and Med wever, if you expect to red m the total monthly amoul	icare taxe eive a ta	es. You may inc x refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	1,295.21
17.		tary deductions: Thations, union dues, an		ductions	that your job re	quires, such as retirement		
				ob, such	as voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing too Do not i	gether, include payme	ents that you make for you life insurance on your dep	ır spouse	's term life insu	e insurance. If two married people are trance. I spouse's life insurance, or for any form	\$	24.00
19.	adminis	trative agency, such	The total monthly amount as spousal or child suppo	rt paymei	nts.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.			y amount that you pay for					
20.		condition for your job		ouddallo	ir triat to ottrior	oquirou.		
	for y	our physically or men	ntally challenged depende	nt child if	no public educ	ation is available for similar services.	\$	0.00
21.			amount that you pay for any elementary or second			sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is re	equired for the health		ır depend	lents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.		
	Paymer	nts for health insurance	ce or health savings accor	ınts shou	ld be listed only	y in line 25.	\$	135.00
23.	for you phone s income,	and your dependents service, to the extent , if it is not reimbursed include payments for	 such as pagers, call wainecessary for your health by your employer. basic home telephone, in 	ting, calle and welfa ternet and	er identification, are or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.			owed under the IRS exp		-	ount you proviously deducted.	\$	5,330.61
مام ۵		es 6 through 23.	There are additional	de deserve	a allannad bord	. Maria Tari		
Add	litional E	Expense Deductions	These are additional Note: Do not include					
25.		insurance, disability						
	your de					ises. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
		ce, disability insurand					or	
	Health i	ce, disability insurand pendents.		counts tha	at are reasonab		or	
	Health i	ce, disability insurand pendents. nsurance		sounts that	802.49		or	
	Health i	ce, disability insurand pendents. nsurance ty insurance		\$ \$	802.49 20.00		or \$	1,245.56
	Health in Disability Health statement Total	ce, disability insurand pendents. nsurance ty insurance	e, and health savings acc	\$ \$ + \$	802.49 20.00 423.07	ly necessary for yourself, your spouse, o		1,245.56
	Health i Disabilit Health s Total Do you	ce, disability insurand pendents. nsurance ty insurance savings account actually spend this to No. How much do yo	e, and health savings acc	\$ \$ + \$	802.49 20.00 423.07	ly necessary for yourself, your spouse, o		1,245.56
	Health i Disabilit Health s Total Do you	ce, disability insurand pendents. nsurance ty insurance savings account actually spend this to No. How much do yo Yes	e, and health savings according to the savings	\$ \$ + \$ \$	802.49 20.00 423.07 1,245.56	Copy total here=>		1,245.56
26.	Health i Disabilit Health s Total Do you Continue continue your ho	ce, disability insurand pendents. nsurance ty insurance savings account actually spend this to No. How much do yo Yes ued contributions to to pay for the reaso usehold or member of the period of the reaso usehold or member of the pay for the reaso usehold or member of the pendents.	ee, and health savings according tall amount? u actually spend? the care of household anable and necessary care	\$ \$ * * or family and sup tho is una	802.49 20.00 423.07 1,245.56 members. The port of an elderable to pay for s	Copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	\$	1,245.56
	Health i Disabilit Health s Total Do you Continue continue your ho include Protect	ce, disability insurance pendents. Insurance ty insurance savings account actually spend this to No. How much do you actually spend this to the topay for the reason usehold or member of contributions to an action against family vision agains	otal amount? u actually spend? the care of household onable and necessary care of your immediate family we count of a qualified ABLE iolence. The reasonably	sounts that \$ \$ + \$ for family and sup tho is una program necessar	802.49 20.00 423.07 1,245.56 members. The port of an elder lible to pay for ship 26 U.S.C. § 5 y monthly expe	Copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member of uch expenses. These expenses may	\$\$	· -

Debtor 1 Debtor 2	Gregory Paul Nichols Teresa D. Nichols	Case number (if I	known)		
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance and oper	ating expenses	on	
	If you believe that you have home energy color, then fill in the excess amount of home en	osts that are more than the home energy costs included ergy costs	d in expenses or	n line	
	You must give your case trustee documenta amount claimed is reasonable and necessar	ation of your actual expenses, and you must show that try.	the additional	\$	0.00
29.		ren who are younger than 18. The monthly expenses pendent children who are younger than 18 years old to			
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must explain whot already accounted for in lines 6-23.	y the amount		
	* Subject to adjustment on 4/01/22, and ever	ery 3 years after that for cases begun on or after the dat	e of adjustment	t. \$	0.00
		ne monthly amount by which your actual food and cloth allowances in the IRS National Standards. That amour s in the IRS National Standards.			
		onal allowance, go online using the link specified in the obe available at the bankruptcy clerk's office.	separate		
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in the form nization. 11 U.S.C. § 548(d)(3) and (4).	of cash or finan	cial	
	Do not include any amount more than 15%	of your gross monthly income.		\$_	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.		\$	1,245.56
Ded	uctions for Debt Payment				
	For debts that are secured by an interest i oans, and other secured debt, fill in lines	n property that you own, including home mortgage 33a through 33e.	s, vehicle		
	To calculate the total average monthly paymoreditor in the 60 months after you file for bar	ent, add all amounts that are contractually due to each ankruptcy. Then divide by 60.	secured		
	Mortgages on your home			Averag	e monthly
33a.	Copy line 9b here		:	=> \$	0.00
	Loans on your first two vehicles				
33b.	Copy line 13b here		:	=> \$	405.60
33c.	Copy line 13e here		:	=> \$	335.00
33d.	List other secured debts:				
Nam	e of each creditor for other secured debt	Identify property that secures the debt	Does paymer include taxes or insurance?	3	
		Bed and 3 Televisions financed by	■ No		
	Conn's HomePlus	Conn's.	☐ Yes	\$	55.80
			■ No		
	Conns	Living room suite financed by Conns.	☐ Yes	\$	40.25
	First Investors Financial Services	2014 Honda CR-V 120000 miles	■ No □ Yes	\$	276.67
				"	
33e	Total average monthly payment. Add lines	33a through 33d \$	1 113 32	Copy total here=> \$	1,113.32

Debtor 1 Debtor 2		ory Paul Nichols sa D. Nichols			Case i	number (<i>if known</i>)		
			33 secured by your primar					
_		Go to line 35.	ar support or the support of	your depe	muems :			
•		State any amount that you	must pay to a creditor, in add ssession of your property (cal the information below.					
Name	of the	creditor	Identify property that secure	s the debt	Т	otal cure amount	Mon	thly cure unt
	lnve:	stors Financial	2014 Honda CR-V 1200	000 miles	\$	681.00	÷ 60 = \$	11.35
					\$		÷ 60 = \$	
					\$		÷ 60 = +\$ _	
					Total \$	3 11.35	Copy total here=>	\$ 11.35
a- B								
35. Do	o you c e past	owe any priority claims - su due as of the filing date of	ich as a priority tax, child s your bankruptcy case? 11	u pport, or : U.S.C.§ 50	alimony - tha 7.	t		
		Go to line 36.						
	Yes.		of these priority claims. Do r h as those you listed in line 1		current or			
			ue priority claims		\$	213.00	÷ 60	3.55
36. Pr	ojecte	d monthly Chapter 13 plan						
Of the To	fice of Exection Exection Execution	the United States Courts (for utive Office for United States st of district multipliers that inclu-	tated on the list issued by the districts in Alabama and Nor Trustees (for all other districtes your district, go online using that also be available at the bank	th Carolina ts). he link speci	or by X ied in the			
			•	.,.,,			Copy total	
Av	erage	monthly administrative expe	nse			\$	here=> \$	
		of the deductions for debt s 33e through 36.	payment.				\$	1,128.22
Total I	Deduc	tions from Income						
38. Ac	ld all c	of the allowed deductions.						
		e 24, All of the expenses all allowances	owed under IRS	\$	5,330.61			
C	opy lir	e 32, All of the additional ex	pense deductions	\$	1,245.56			
C	opy lir	e 37, All of the deductions fo	or debt payment	+\$	1,128.22	_		
Т	otal de	ductions		\$	7,704.39	Copy total here=	> \$	7,704.39

Debtor 1 Debtor 2		ory Paul N sa D. Nich			Case	e nur	mber (<i>if known</i>)			
Part 2:	Det	ermine You	r Disposable Income Under 11 U.S.C. § 13	25(b	o)(2)					
			ent monthly income from line 14 of Form 1 Current Monthly Income and Calculation of					\$		8,846.30
chi dis red ned 41. Fill	ildren. ability eeived i cessary	The monthly payments for accordance to be expequalified re	ly necessary income you receive for supporty average of any child support payments, form a dependent child, reported in Part I of Form the with applicable nonbankruptcy law to the ended for such child. Interest deductions. The monthly total of a monthly as contributions for qualified retirem.	ter on 12 xten	eare payments, or 2C-1, that you t reasonably	;	\$0.	.00		
	in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from a specified in 11 U.S.C. § 362(b)(19).				rement plans, as	;	\$ 479.	41		
42. To	2. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A).				y line 38 here=>	• ;	\$7,704.	39		
exp the	oenses eir expe	and you ha	al circumstances. If special circumstances juve no reasonable alternative, describe the special give your case trustee a detailed explanation for the expenses.	ecia	l circumstances and	b				
Descri	be the	special cir	cumstances		Amount of exper	nse	•			
					\$		_			
					\$		_			
					\$		_			
			Total	\$_	0.00		opy ere=>\$	0.	00	
44. To	tal adj	ustments. <i>F</i>	Add lines 40 through 43.		=> \$	S	8,183.80	Copy here=	> - \$	8,183.80
	1	·	thly disposable income under § 1325(b)(2).	. Sul	otract line 44 from lin	ne :	39.	\$		662.50
hav tim you	ange i ve chai e your u filed y	n income onged or are case will be our petition	r expenses. If the income in Form 122C-1 or virtually certain to change after the date you f open, fill in the information below. For examp, check 122C-1 in the first column, enter line in when the increase occurred, and fill in the a	iled ole, 2 in	your bankruptcy pet if the wages reported the second column,	titio d in	on and during the increased after			
Form		Line	Reason for change		Date of change		Increase or decrease?	Amo	unt of change	
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2					_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase	\$ _ \$ _ \$ _		_
1 220	C-2				_		☐ Decrease	\$_		_

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Debtor 1 Debtor 2	Gregory Paul Nichols Teresa D. Nichols	_	Case number (if known)
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	ation (on this statement and in any attachments is true and correct.
-	/s/ Gregory Paul Nichols Gregory Paul Nichols Signature of Debtor 1	-	/s/ Teresa D. Nichols Teresa D. Nichols Signature of Debtor 2
Date	July 26, 2019 MM / DD / YYYY	_	July 26, 2019 MM / DD / YYYY

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
<u> </u>	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of North Carolina

In re	Gregory Paul Nichols Teresa D. Nichols		Case No).		
		Debtor(s)	Chapter	13		
	DISCLOSURE OF COMPENS.	ATION OF ATTO	RNEY FOR I)EBT(OR(S)	
	tursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that ompensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to e rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
				5	,000.00_	
	Prior to the filing of this statement I have received		\$	1	,000.00	
	Balance Due		\$	4	,000.00	
2.	\$310.00 of the filing fee has been paid.					
3.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
4.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
5.	■ I have not agreed to share the above-disclosed compensation	ation with any other person	n unless they are me	mbers ar	nd associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				ociates of my law firm. A	
5.	In return for the above-disclosed fee, I have agreed to rende	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors a d. [Other provisions as needed] Negotiations with secured creditors to redure affirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house 	nt of affairs and plan which and confirmation hearing, and ace to market value; exas needed; preparation	th may be required; and any adjourned be cemption plannir	earings to	hereof;	
7.	By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any discharge any other adversary proceeding.	es not include the following	ng service: licial lien avoida	nces, re	lief from stay actions or	
	C	CERTIFICATION				
	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	reement or arrangement fo	or payment to me for	r represei	ntation of the debtor(s) in	
_ <u>J</u>	July 26, 2019	/s/ Danny Bradfo				
I	Date	Danny Bradford Signature of Attorn				
		Paul D. Bradford	J, PLLC			
		455 Swiftside Di Suite 106	rive			
		Cary, NC 27518-				
		(919)758-8879 if dbradford@brad		3		
		Name of law firm	iioiu-iaw.com			

United States Bankruptcy Court Eastern District of North Carolina

In re	Gregory Paul Nichols Teresa D. Nichols		Case No.		
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	July 26, 2019	/s/ Gregory Paul Nichols	
		Gregory Paul Nichols	
		Signature of Debtor	
Date:	July 26, 2019	/s/ Teresa D. Nichols	
		Teresa D. Nichols	
		Signature of Debtor	
Date:	July 26, 2019	/s/ Danny Bradford	
		Signature of Attorney	
		Danny Bradford 23011	
		Paul D. Bradford, PLLC	
		455 Swiftside Drive	
		Suite 106	
		Cary, NC 27518-7198	
		(919)758-8879 Fax: (919)803-0683	

AmeriCredit/GM Financial Attn: Bankruptcy Po Box 183853 Arlington, TX 76096

First Investors Financial Services Attn: Bankruptcy 380 Interstate N Parkway, Suite 300 Atlanta, GA 30399

I C System Inc Attn: Bankruptcy P.O. Box 64378 St. Paul, MN 55164

Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502

Web Bank Fingerhut 6250 Ridgewood Road Saint Cloud, MN 56303 Conn's HomePlus Attn: Bankruptcy Dept Po Box 2358 Beaumont, TX 77704

Home Point Financial Corporation Attn: Correspondence Dept 11511 Luna Road; Suite 200 Farmers Branch, TX 75234

MOHELA Attn: Bankruptcy 633 Spirit Dr Chesterfield, MO 63005

Regional Acceptance Co P.O. Box 61427 Raleigh, NC 27661 Conns Attn: Bankruptcy Department Po Box 815867 Dallas, TX 75234

Hutchens Law Firm Joseph J. Vonnegut, Esq. PO Box 2505 Fayetteville, NC 28302

NC Dept of Revenue Attn: Bankruptcy Unit PO Box 1168 Raleigh, NC 27602-1168

Verizon Wireless Attn: Bankruptcy 500 Technology Dr, Ste 550 Weldon Spring, MO 63304